

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. <i>10/081,642</i>	FILING DATE
						APPLICANT(S)	
<i>6-21-05</i>						CLAIMS	
	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT		
	IND	DEP	IND	DEP	IND	DEP	
1							
2							
3							
4							
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47							
48							
49							
50							
TOTAL IND.	2						
TOTAL DEP.	9						
TOTAL CLAIMS	11						

CLAIMS					
	IND	DEP	IND	DEP	IND
51					
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TOTAL IND.					
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BEST AVAILABLE COPY